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CN

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL FORM (37 C.F.R. § 1.114)

DOCKET NO. 10020/18103	APPLICATION SERIAL NO. 10/698,233	EXAMINER Marie Rose YAMNITZKY	ART UNIT 1774
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INVENTOR: Chihaya ADACHI et al.

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Date: February 6, 2007

Reg. No. 47,598

Signature: _____

Kevin T. Godlewski

This is a **Request for Continued Examination** under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. 10/698,233, filed on October 31, 2003, entitled **PHOSPHORESCENT ORGANIC LIGHT EMITTING DEVICES**.

The following constitute the submission **required** by 37 C.F.R. § 1.114(a) and is attached:

- ☒ Amendment
☒ Information Disclosure Statement and Form PTO-1449
☐ Drawing Changes
☐ Other Submission: _____

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA*	RATE(\$)/PER CLAIM	FEE (\$)
BASIC FEE						790.00
TOTAL CLAIMS	20	-	20	0	50.00	0.00
INDEPENDENT CLAIMS	2	-	3	0	200.00	0.00
MULTIPLE DEPENDENT CLAIM					360.00	
				*Number extra must be zero or larger	TOTAL	790.00
	If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.					SMALL ENTITY TOTAL

2. Please charge the required RCE and submission filing fee of **\$790.00** to the deposit account of **Kenyon & Kenyon LLP**, deposit account number **11-0600**.

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3. The Commissioner is hereby authorized to charge payment of the fees, including any additional fees required, associated with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account of **Kenyon & Kenyon LLP**, deposit account number **11-0600**.
4. A duplicate copy of this transmittal form is enclosed.

Respectfully submitted,

Dated: February 6, 2007

By: _____



Kevin T. Godlewski

Reg. No. 47,598

KENYON & KENYON LLP

One Broadway

New York, New York 10004

(212) 425-7200 (telephone)

(212) 425-5288 (facsimile)

CUSTOMER NO. 26646